

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		2	10/11/01
FORMALITY REVIEW	H-S	866	06-13-01
RESPONSE FORMALITY REVIEW	ATP	1110	10-5-01
	MTS	654	11/16/01

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final Original	
1	12/16/01
2	12/16/01
3	12/16/01
4	12/16/01
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Claim	Date
Final Original	
51	12/16/01
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Claim	Date
Final Original	
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149	12/16/01
150	12/16/01

BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
 staple additional sheet here

(LEFT INSIDE)

50-571  
 11/16/01

617  
 10-6-01